

TRAINING REQUEST

A. Requestor Information

Requestor Name:

Position Title:

Organization:

Street:

City:

State:

Zip:

County:

Telephone:

Fax:

Email:

B. Training Event Information

Name of Event:

Type of Event: ☐ Presentation/Training ☐ Exhibition ☐ Other

Type of Training:

☐ Awareness/Sensitivity

☐ ADA – Americans with Disabilities Act

☐ Specialized Training – Emergency ☐ Specialized Training – Medical

☐ Specialized Training – Legal

☐ Specialized Training - Public Safety

Purpose of Event:

Length of Event:

Date/Time:

Floor:

Room:

Location:

Street:

City:

State:

Zip:

Target Audience:

Estimated Number of Attendees:

C. Technical Information

Can you provide?

☐ Tables/Chairs (for the exhibition)

☐ Screen (for our PowerPoint presentation)

☐ Interpreter (for presentation/training)

☐ LCD projector

☐ CART (for presentation/training)

The Maryland Office of the Deaf & Hard of Hearing, as a service publicly funded by Maryland taxpayers, regrets that it cannot provide training or services outside of the State of Maryland.

The Maryland Office of the Deaf and Hard of Hearing, ODHH, regrets it may not have the resources to grant every training request. Each training request will be carefully considered and should be received at least 3-4 weeks in advanced of the event for adequate preparation.